

**RECEIVED
CENTRAL FAX CENTER****OCT 27 2004****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Beshai	
Application No.: 09/748,848	Group Art Unit: 2681
Filed: 12/28/2000	Examiner: BOB A. PHUNKULH
Title: Global Distributed Switch	
Attorney Docket No.: 120-358	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE UNDER 37 CFR 1.111

Dear Sir:

In response to the Office Action of August 26, 2004, please amend this application as shown on the attached sheets.

Amendments to the claims begin on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.

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Assistant Commissioner of Patents

December 27, 2000



f) Our cheque No. 008674, Patent Application Fee
Determination Record PTO/SB/06 and Fee Transmittal
Form PTO/SB/17, covering:

Filing Fee	\$710.00
Recording of Assignment	\$ 40.00
Total Number of Claims:	34
Claims in excess of 20 (14 @ \$18)	<u>\$252.00</u>
Total	\$1,002.00

The applicant/inventor(s) qualify for large entity status.

Priority is claimed in the Declaration/Power of Attorney on Canadian patent application No. 2,293,920 filed December 31, 1999. A certified copy of the Canadian priority application as filed is attached.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to our Account No. 19-5113.

Please note that the address of the agents for the applicant in this matter should be the Montreal address identified in the enclosed Declaration/Power of Attorney. Correspondence may be directed to Max R. Wood at the Montreal address of Swabey Ogilvy Renault.

Respectfully submitted,

Max R. Wood
Reg. No. 40,388
Agent of Record
Encls.

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/748848

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	34	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	34 minus 20 =	14
INDEPENDENT CLAIMS	1 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	21	34	= -
Independent	7	3	= 4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	1425.00
X80=	0
+270=	0
TOTAL	962.00

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	352.00
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.